

C 4598

Annual Report
of the
School Medical Officer
to the
Education Committee
of the
Anglesey County Council
1944.

ANGLESEY EDUCATION COMMITTEE.

To the Chairman and Members of the Education Committee.

Mr. Chairman, Ladies and Gentlemen,

I have the honour of submitting my 32nd Annual Report upon the School Medical Service in the County.

This is the first report after the cessation of hostilities in Europe so that now one can look back upon the past years and see in what manner the County of Anglesey was affected.

The first problem which confronted the Local Authorities was to make arrangements for dealing with the large number of scholars who were brought into the district from other areas. These scholars had to receive education, school accommodation provided and also Medical inspection and medical treatment and in addition milk rations. It is satisfactory to record that this problem with all its difficulties was solved very efficiently and it is worthy of note that the health and the physique of these children were greatly improved by their stay in the County and some eventually even surpassed our children in this respect. Many of them acquired a knowledge of Welsh and even to speak it fluently.

Another problem which arose was that of housing. This was due to the necessity for billeting unaccompanied children, for housing evacuated families and also due to the fact that men in the services stationed in the County often made arrangements for their families to live in the vicinity of their stations. There was overcrowding in many areas but this appears to have had no ill effect upon the general health of the community.

The works carried out in the County for the various services in particular the Air Ministry—were of special benefit to numbers of skilled and of unskilled workers. Wages were good, money was more plentiful, this resulted in a higher standard of living. Home conditions improved and the nutritional standards were higher.

The ultimate finding is that one cannot find any sign of deterioration in the health of the community due to nutritional causes.

The immunisation and re-immunisation of scholars has proceeded steadily and the figures for the County are as follows :

Percentage of Child Population immunised at 31st December, 1944: ages 1-5, 90.64, ages 5+-15, 93.22. Total 95.57.

The Assistant School Medical Officer has made an active investigation into the possible incidence of tuberculosis amongst school children, by means of the Patch Test. The results of this together with the X-Ray findings are given in the body of the report.

I would thank the Chairman and the Medical Inspection Committee for their interest and support and would also express my gratitude to the members of the staff, the Teachers and the Nurses for their wholehearted co-operation in the work of the School Medical Service.

I have the honour to be,

Your obedient Servant,

ARNOLD DAVIES.

INTRODUCTION.

Sum produced by Id. Rate, 1944-45 (estimated) £698 16s. 8d.

1. Number of Elementary Schools in the

County	62 (70 departments)
Total Average Attendance	5,131
Number of Scholars examined :	
Routine Examinations	2,526 including 307 evacuees.
Special and Re-Examinations	1,424 including 111 evacuees.
Number of Routine Inspection visits	143 including 24 to evacuee schools.
Number of Special Visits	254 including 13 to evacuee schools.
- Visits to Schools include visits for Diphtheria Immunisation.

REPORT OF ASSISTANT SCHOOL MEDICAL OFFICER.

MEDICAL INSPECTION FINDINGS.

The routine examination of children aged 5, 8, and 12 respectively in the Elementary Schools along with those showing any defect (or at the request of parents or teachers) was carried out. Children in the physically defective list were re-examined.

The total number so examined amounted to 5,162.

Clothing and Footgear.

Despite war conditions, this has generally been of fair standard. The Footwear has been of very inferior quality.

Cleanliness.

The maintenance of a good state of cleanliness amongst the children is one of the main problems of the School Nurses. Despite constant attention on their part, certain children are persistently dirty and harbour nits and vermin.

Nutrition.

My general impression is that the standard of nutrition of the children of Anglesey now is quite as good, if not better than when I remember it 20 years ago. Undoubtedly the main factor in keeping up the standard despite war time restrictions is due to the excellent school dinners which are now served in most schools. I sampled a number of meals and found them of high standard. Tribute must be given to all helpers and teachers who work so hard to make these meals a success.

It is not possible to compare the position to-day with the previous years' figures as my standard of assessing a scholar's nutrition differs from that used by Dr. Young. It is my practice to include in the "A" category only exceptionally fit scholars, and borderline cases with even very slight subnormal nutrition are not included in the "average" or "B" category.

Halibut Liver Oil Capsules have been distributed to be given by the teacher with milk at morning playtime to certain particularly weak and undernourished children. I would suggest that when supplies of Halibut Oil are more easily obtained, that each pupil should take a capsule with their morning milk. The improvement to the scholar is in my opinion very obvious. The question of the distribution of iron tonic tablets should be considered, particularly to cases of slight anaemia of whom there are at least 250.

Skin Diseases.

Scabies was this year the most common skin disease found at Medical Inspections. 25 cases were notified to the District Medical Officers of Health and were either admitted to the Sick Bay or followed up by the School Nurses. Impetigo continues to be fairly frequent and is treated at the Minor Ailment Clinics.

Nose and Throat.

113 Scholars received treatment for Nose and Throat defects during the year. Scholars are not referred for operation until all other forms of treatment have been tried. It is my practice to refer to the School Dental Surgeon any of these scholars with defective teeth and this very often makes operation for Tonsils and Adenoids unnecessary.

Vision.

212 Scholars were referred to the School Ophthalmic Surgeon during the year. All Scholars for whom glasses have been prescribed are inspected each year. I have been very favourably impressed by the excellent way in which this branch of the School Medical Service is conducted in the County. Cases requiring urgent treatment are sent to the School Ophthalmic Surgeon at the C. & A. Infirmary, Bangor. One of these cases was visited by the Assistant School Medical Officer at the home and sent immediately to Hospital. The boy was already blind in one eye from birth and the other eye had serious Streptococcal infection. I am pleased to report he received Penicillin treatment with very satisfactory results. No doubt but for the prompt action and modern treatment the boy would most probably have become permanently blind.

Heart and Circulation.

Heart murmurs were heard in about 40 cases but only 6 of these were organic. These scholars are excused physical drill.

Lungs.

Asthma and Bronchitis are the most frequent defects noted. All are kept under observation and the rare cases of suggested lung involvement were referred to the Tuberculosis Officer, 19 cases were so referred. Only 1 case of Pulmonary Tuberculosis amongst children of school age and under was notified during the year. There were, however, 4 cases of Non-Pulmonary Tuberculosis.

Orthopaedic.

Only one case of serious Orthopaedic condition was encountered, one of scoliosis. The boy is being kept under observation, as treatment was not considered beneficial at present. All cases of deformity, flat feet, faulty posture, etc., were referred to the Orthopaedic Surgeon.

SECONDARY SCHOOLS.

All the entrants to these schools were fully examined and all the remaining pupils reviewed as to their general health. If there was any complaint, signs of any defects or history of recent illness, a more detailed examination was made.

The findings were similar to those mentioned in the report on the Elementary Schools. Whilst I do not advocate that the School Nurses should make detailed cleanliness surveys as is done in the Elementary Schools, at the same time in my opinion periodical visits are essential.

EVACUEES.

The number of evacuated scholars gradually diminished up to August when a further contingent arrived. They were inspected at the School Premises. Physically defective children were treated at the Sick Bays, Llanfairpwll and Holyhead, and the Special Hostel at Llangefni.

DIPHTHERIA . IMMUNISATION.

The work of immunisation was continued during the year—732 being immunised. During an epidemic of Diphtheria in the Llangefni Area all the scholars received a boosting dose of A.P.T. Schick Tests were conducted in 6 schools (465 scholars) and the 15 positive reactors were given immunising doses of A.P.T.

PATCH TESTING—TUBERCULOSIS.

Towards the latter end of 1944, it was decided to survey certain schools in the County. A supply of Tuberculin Jelly was obtained from Professor Tytler for the purpose.

The following is a copy of the letter addressed to the parents asking for their consent :—

TUBERCULOSIS PREVENTION.

Tests are now being made throughout Wales to find out how many children are liable to be attacked by Tuberculosis.

The test is made by placing a *small* amount of special ointment on the skin and covering it with plaster. The plaster is removed and from the colour of the skin under the plaster, it is possible to obtain valuable information about the child's health.

I trust that you will be glad to avail yourself of this opportunity of adopting this procedure for safeguarding your child's health, and should be pleased if you would signify your approval by signing below and return this letter to the Head Teacher.

Parents will be advised by letter from this Office if the result is not favourable. If no report is received within 14 days, parents can rest assured that their child has passed the test satisfactorily.

The response was very satisfactory and there were only about a dozen refusals in the nine schools surveyed.

The Assistant School Medical Officer attended the School with the School Nurse to apply the "patch" and they returned to read the test two days later. Great interest was taken in the reading and usually the Medical Practitioners of the District were present.

The scholars with positive results were classified according to the severity of the reaction. All scholars classified "positive" were referred to the Tuberculosis Officer, Dr. Glyn Jones, who

arranged and conducted x-ray examinations. The following Table shows the results obtained :—

School.	Total	+	—	%	X-Ray Arranged.	X-Ray Classifications.					
						1	2	3	4	5	Absent
3 Amlwch	144	68	76	47	68	29	14	9	7	2	7
14 Llaingoch	75	20	55	27	20	10	9			1	
18 Llanbedrgoch	55	15	40	27	15	7	6				2
21 Llanddona	57	5	52	9	5	2	2				1
27 Llanerchymedd	121	58	63	48	58	25	10	6	7	2	8
50 Llanrhyddlad	61	28	33	46	28	14	9	3	1		1
57 Newborough	110	32	78	29	32	11	11	4	3	2	1
64 Bodorgan	72	17	55	24	17	8	4	1			4
66 Gwalchmai	130	78	52	60	78	34	20	6	6	5	7
Total	825	321	504	39	321	140	85	29	24	12	31

LIST OF CLASSIFICATIONS.

- Group 1. Chest appears normal.
- Group 2. Evidence of calcification in hilum and/or lung parenchyma, indicating primary tuberculous infection, not now active.
- Group 3. Increased bronchial markings suggestive of bronchitis or asthma.
- Group 4. Cardic shadow enlarged, suggestive of rheumatic heart disease.
- Group 5. Changes in lung suspicious of active tuberculosis. To be kept under observation.

The x-ray results were immediately conveyed to the parents and to the family Doctors concerned.

Scholars in Group 5 were followed up by Dr. Glyn Jones and 11 of the Scholars have now been certified free from infection and allowed to resume attendance at School.

REPORT OF SCHOOL OPHTHALMIC SURGEON.

During 1944 I attended twenty Clinics and saw three hundred and twenty seven children in Anglesey.

Apart from a small percentage of myopic children, a large majority of the children suffer from hypermetropia, partly with concomittant strabismus (convergent squint). It is regrettable that we cannot avail ourselves of the services of an orthoptist, as the number and proportion of squints among the children examined is such a high one, and squint training should be of much value in most of these cases.

Operations on squints could be arranged only very infrequently owing to the shortage of available hospital beds.

G. C. LAZLO.

REPORT OF SCHOOL DENTAL SURGEON.

During the past eighteen months, each school on the island has been visited for the purpose of dental inspection and treatment.

The condition of those children who have regular treatment each time the school is visited, is encouraging, and their number increases each time slowly but surely, no doubt the number of consents will increase now that treatment is free, and the consent forms accordingly simpler for the parents to fill in.

The older pupils are taking more pride in their teeth and are beginning to realise that appearance is a factor which has a value, and a definite bearing on their future prospects, social and commercial. The objection to conservative treatment is noticeably less each year.

The basic cause of caries and gingivitis amongst the children is largely a lack of cleanliness. Routine use of the tooth brush is lamentably infrequent, and many households possess none at all. The results of oral stagnation are intensified by war time diet, and its various deficiencies.

May I again express my thanks to the Heads of all the schools and their staffs for their unfailing co-operation and help.

CATHERINE M. ROLANT-THOMAS.

REPORT OF THE SCHOOL EAR, NOSE AND THROAT SURGEON.

I have nothing of particular interest for your Annual Report for the year 1944.

I notice there has been a very considerable diminution in the number of cases referred for the T. and A. operation within the past few months. Are you quite happy about the question of defective hearing in the Anglesey school children? It is a very important point to which we are now devoting much attention, as we find that deafness in adult life is very often the result of neglect of minor hearing troubles in childhood.

JOHN ROBERTS.

REPORT OF SCHOOL ORTHOPAEDIC SURGEON.

The work of the Orthopaedic Clinics in Anglesey has continued very satisfactorily. There has been a little delay in the admission of cases because of the extra burden of military casualties put upon civilian surgeons and nurses, but the local work has been beyond reproach, and it seems to me that the parents have appreciated it.

B. L. McFARLAND.

ORTHOPAEDIC AFTER CARE CENTRES. ANNUAL REPORT 1944.

Centre	No. of Visits.	No. of Patients	No. of Treat- ments.	Classes	No. children in Home class	Visits.	Sunlight. No. of ren.	No. of Treat- ments.
Holyhead	42	35	493	46	15	47	60	644
Llangefni	43	18	289	4	2	18	1	4
Amlwch	43	16	286	11	4	9		
Beaumaris	42	6	115	9	2	24		
Totals	170	75	1183	70	23	98	61	648

G. N. HOLME.

FOLLOWING UP BY THE SCHOOL NURSES, 1944.

DISTRICT	Total Number of Schools in District	Total Average Attend'ce of Schools in District	Number of Examin- ations of Scholars.	Number of Visits to Homes.	Number of Visits to Schools	Number of Health Talks to Schools
Aberffraw	3	239	2793	116	65	65
Amlwch	3	357	5458	97	95	33
Beaumaris	1	175	714	41	19	13
Bodedern	3	141	1529	24	45	—
Bodorgan	3	164	1535	25	59	63
Gwalehmai	4	309	4177	196	89	—
Holyhead L.M.S.	6	1253	15406	756	251	69
Llanddona	1	60	468	144	26	114
Llanerchymedd	2	198	3176	2	78	51
Llanfaethlu	4	199	1926	15	80	4
Llanfairpwll	2	169	2019	352	42	16
Llanfechell	3	195	1909	66	65	9
Llangefni	5	389	4402	200	108	1
Llangoch	2	117	1194	99	47	1
Llanidan	2	147	1158	276	62	30
Newborough	3	209	3084	144	61	11
Marianglas	4	186	4606	25	115	32
Menai Bridge	2	218	1650	105	69	28
Pentraeth	4	163	1977	16	57	7
Rhoscolyn	2	113	1656	39	47	62
Rhosybol	3	130	2076	41	77	4
Total	62	5131	62913	2779	1557	613

INFECTIOUS DISEASES.

School Closures.

The following schools were closed, on account of epidemics of Infectious Diseases, during 1944.

Scarlet Fever	Llangaffo, Gwalehmai.
Diphtheria	Llangefni C.S.
Whooping Cough	Llansadwrn.
Measles	Llandrygarn.
Chicken Pox	Llangefni C.S., Llangefni C.E., Llanbedrgoch.
Mumps	Llangristiolus.

Exclusion of Scholars,

Scarlet Fever	39
Diphtheria	17
Whooping Cough	33
Measles	13
Chicken Pox	71
Mumps	28
Scabies	7
Impetigo	1
Cards C. E. F.	6

215

MINOR AILMENT CLINICS.

DISTRICT	Old Cases	New Cases	Total Number of Cases	Total Number of Attendance	Cured	Im-proved	Under Treatment
Amlwch	6	665	671	1855	630	—	41
Beaumaris	42	173	215	1444	181	23	11
Holyhead	77	253	330	1287	255	8	67
Llangefni	9	92	101	264	92	1	8
Menai Bridge	8	152	160	1037	131	8	21
Rural	105	522	627	2445	514	25	88
Total	247	1857	2104	8332	1803	65	236

MEDICAL INSPECTION RETURNS.

Return of defects found by Medical Inspection in the year ended 31st December, 1944.

A.—Requiring Treatment.

B.—Requiring to be kept under observation but not requiring treatment.

DISEASE OR DEFECT.		Elementary Schools				Secondary Schools		Evacuated Scholars	
		Routine		Special					
		A	B	A	B				
Skin	1. Ringworm—Scalp	—	1	—	—	—	—	—	—
	2. Ringworm—Body	—	—	1	1	—	1	—	—
	3. Scabies	17	10	8	8	3	—	6	—
	4. Impetigo	3	1	2	5	1	—	3	—
	5. Other diseases not T.B.	1	6	2	9	—	1	4	—
Eye	6. Blopharitis	3	8	7	5	3	2	—	—
	7. Conjunctivitis	5	—	5	1	—	1	—	—
	8. Keratitis	—	—	—	—	—	—	—	—

DISEASE OR DEFECT.		Elementary Schools				Secondary Schools		Evacuated Scholars	
		Routine		Special					
		A	B	A	B	A	B	A	B
Eye	9. Corneal Opacities	—	—	—	1	1	—	—	—
	10. Other conditions	1	4	5	—	—	—	—	—
	11. Defective Vision	119	22	104	31	133	23	17	5
	12. Squint	21	12	12	2	13	4	5	1
Ear	13. Defective Hearing	6	8	6	6	1	1	—	2
	14. Otitis Media	4	6	9	15	1	4	—	1
	15. Other Ear Diseases	2	4	4	1	—	—	1	—
	16. Chronic Tonsilitis only	18	132	27	125	1	16	6	7
Nose & Throat	17. Adenoids only	1	9	4	1	—	1	—	—
	18. Chronic T. & A.	42	42	21	20	3	4	2	2
	19. Other conditions	6	6	4	13	2	4	1	—
	21. Enlarged Cervical Glands	22	21	3	50	1	7	—	—
Heart	22. Defective Speech	—	10	2	11	—	2	—	1
	22. Organic	2	1	—	4	—	2	—	—
	23. Functional	—	27	—	13	—	9	—	5
	24. Anaemia	—	—	5	—	—	1	—	—
	24a. Debility	13	79	47	71	23	56	14	36
	25. Bronchitis	—	44	—	41	—	9	—	1
	26. Other non-T.B.	—	—	—	4	—	4	—	1
	27. Pulmonary	—	—	—	—	—	—	—	—
	28. do. — suspected	5	33	10	14	1	4	3	—
	29. Non-Pulmonary Glands	—	—	—	—	—	—	—	—
Nervous System	30. Bones and Joints	—	—	—	—	—	—	—	—
	31. Skin	—	—	—	—	—	—	—	—
	32. Other	—	—	—	—	—	—	—	—
	33. Epilepsy	1	2	—	3	—	—	—	—
Doform-	34. Chorea	—	2	—	4	—	1	—	4
	35. Other conditions	—	3	2	5	—	1	—	1
Doform-	36. Rickets	1	—	—	1	—	—	—	—
	37. Spinal Curvature	5	10	1	3	—	5	—	1
	38. Other forms	14	19	11	18	7	3	4	3
	39. Mental	1	28	2	41	—	—	—	1
	40. Other Diseases, &c.	11	16	6	21	1	15	—	4
	41. Cards C.E.F.	1	63	1	78	—	6	—	9

Table I.*Medical Inspection of Children attending public Elementary Schools.***A.—ROUTINE MEDICAL INSPECTIONS.**

(1) Number of Inspections in the prescribed Groups :

Entrants	790
Second Age Group	652
Third Age Group	777
Total	2219

(2) Number of other Routine Inspections—Evacuees 307

Grand Total 2526

B.—OTHER INSPECTIONS.

Number of Special Inspections and Re-Inspections :

Anglesey	1313
Evacuees	111
	1424

Table II.

Classification of the Nutrition of Children Inspected during
the year in the Routine Age Groups.

Age Groups.	No. of Children Insp'd	A. (Excellent)		B. (Normal)		C. (Slightly subnormal)		D. (Bad).	
		No.	%	No.	%	No.	%	No.	%
Entrants	790	41	5.19	541	68.49	206	26.07	2	.23
Middles	652	38	5.82	454	69.64	150	23.01	10	1.53
Leavers	777	96	12.36	548	70.53	128	16.47	5	.64
Total	2219	175	7.88	1545	69.54	484	21.82	17	.76
Evacuees	307	7	2.28	243	79.16	55	17.91	2	.65
Grand Total	2526	182	7.21	1786	70.71	539	21.33	19	.75

Secondary Schools.

Table I.

Medical Inspection of Children attending Secondary Schools.

A.—Routine Medical Inspection :

Number of Inspections	1212
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Table II.

Classification of Nutrition.

Excellent	390	32.18%
Normal	701	57.84%
Slightly Sub-Normal	118	9.74%
Bad	3	.24%

Table III.

Group I.—TREATMENT OF MINOR AILMENTS (excluding
Uncleanliness, for which see Table V.)

Total Number of Defects treated or under treatment during the year under the Authority's Scheme	1973
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Group II.—TREATMENT OF DEFECTIVE VISION AND
SQUINT (excluding minor Eye Defects treated as Minor
Ailments—Group I.)

	Under the Authority's Scheme.
ERRORS OF REFRACTION (including squint)	212
Other defects or disease of the eyes (excluding those recorded in Group I)	—
Total	212

No. of Children for whom spectacles were

(a) Prescribed	171
(b) Obtained	171

Group III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

	Under the Authority's Scheme.
Received Operative Treatment	99
Received other forms of Treatment	14
Total number treated	113

Table III.

Dental Inspection and Treatment.

(1) Number of children inspected by the Dentist	
(a) Routine age-groups	6200
(b) Specials	—
(c) TOTAL (Routine and Specials)	6200
(2) Number found to require treatment	5243
(3) Number actually treated	2849
(4) Attendances made by children for treatment	4301
(5) Half-days devoted to :—	
Inspection	107
Treatment	345
TOTAL	452
(6) Fillings :—	
Permanent Teeth	1083
Temporary Teeth	—
TOTAL	1083
(7) Extractions :—	
Permanent Teeth	545
Temporary Teeth	3594
TOTAL	4139
(8) Administrations of general anaesthetics for extractions	75
(9) Other Operations :—	
Permanent Teeth	444
Temporary Teeth	—
TOTAL	444

Table V.**Verminous Conditions.**

(i) Average number of visits made during the year by the School Nurses or other authorised person	20.56
(ii) Total number of examinations of children in the Schools by School Nurses or other authorised person	62913
(iii) Number of children found unclean	131
(iv) Number of individual children cleansed under Section 87 (2) and (3) of the Education Act, 1921	—
(v) Number of cases in which legal proceedings were taken :	
(a) Under the Education Act, 1921—Nil.	
(b) Under School Attendance Byelaws—Nil.	

Table VI.**Blind and Deaf Children.**

Number of totally or almost totally blind and deaf children who are not at the present time receiving education suitable for their special needs.

	(1) At a Public Elementary School	(2) At an Institution other than a special School	(3) At no School or Institution
Blind Children	—	—	1
Deaf Children	—	—	—